							Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECO Effective October 1, 2003							RD	09 843534				
		CLAIMS A	S FILED (Colum	ann 2)		SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY			
TOTAL CLAIMS			1			1	<u></u>	RATE	FEE	٦.	RATE	FEE
FOR			NUMBER	NUMBER FILED		NUMBER EXTRA		SIC FE	E 385.00	OB	BASIÇ FEE	770.00
TOTAL CHARGEABLE CLAIMS			minus 20=		•			XS 9=		OR	XS18=	
INDEPENDENT CLAIMS			minus 3 =		*			X43=	†		X86=	
MULTIPLE DEPENDENT CLAIM PI			RESENT					+145=		OR	+290=	
- 1	f the difference	e in column 1 ıs	less than zero, enter "0" in column 2				<u> </u>		 	OR		
CLAIMS AS AMENDED - PART II							1	OTAL	L	JOH	TOTAL	
(Column 1) (Column 2) (Column 3)							S	MALL	ENTITY	OR	OTHER SMALL	
AMENDMENT A	A	CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER JUSLY	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	.40	Minus	- Ce	6	-	,	⟨\$ 9 ₌	1	OR	X\$18=	1
AME	Independent			1 .	<u> </u>	-/	,	K43=	1	OR	X86=	1
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							145=	1	1	+290=	1
								TOTAL		OR	TOTAL	
	(Column 1) (Column 2) (Column 3)								<u> </u>	OR	ADDIT, FEE	
<u></u>		CLAIMS	T	HIGHE		(Column 3)	_		ADDI-	7 1		4001
AMENDMENT B		REMAINING AFTER AMENDMENT		PREVIO	USLY	PRESENT:	F	RATE	TIONAL		RATE	ADDI- TIONAL FEE
	Total	1. 48	Minus	(ø	-	,	 (\$ 9:		OR	X\$18=	120
	Inaependent	. 8	Minus	***	8	=	—	<43=		1	X86=	
4	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								├	OR	700=	!
(Column 1) (Column 2) (Column 3)								145-		OR	+290=	
								TOTAL DIT FEE		OR	TOTAL ADDIT. FEE	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA	F	ATE	AÚÐI- TIONAL FEE		RATE	ADDI- TIONAL FEE
N N	Total	*	Minus	**		=	X	S 9=		OR	X\$18=	
W	Independent	•	Minus	***		=	 .	(43=		1	X86≈	·
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								ļ	OR	×00≈	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+290=	
** [** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ADD									OR	TOTAL ADDIT, FEE	
. 1	he Highest Num	ber Previously Paid	io For (Total o	o SPACE is Independer	ress than nt) is the	n 3, enter "3." highest number			propriate bo			<u></u>